PTO/SB/17 (10-07)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				Complete if Known				
						10/510,185-Conf. #7513		
						November 17, 2004		
For FY 2008			H			Ryoji Hayashi  David M. Fenstermacher		
Applicant claims small actifus status. See 27 CER 1 27				20		3682		
Applicant claims small entity status. See 37 CFR 1.27				AT OIL			0.1100	
TOTAL AMOUNT OF PAYMENT (\$) 120.00				Attorney Docket	J9867/UZU184	867/0201848-US0		
METHOD OF PAYME	NT (check all t	that apply)			_			
Check X Credit	Card	Money Order	Non	e Other (	please identify	·):		
Deposit Account De	eposit Account Numl	ber:04-0	100	Deposit /	Account Name:	Darby	& Darby I	P.C.
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Charge feet	s) indicated be	low		Charge	e fee(s) ind	icated below, e	xcept for t	he filing fee
Charge any additional fee(s) or underpayments of X Credit any overpayments								
FEE CALCULATION	37 CFR 1.16	and 1.17						
1. BASIC FILING, SEAR	CH AND EXA	MINATION FEES			_			
1 2 1010   1211(0, 02)	•	G FEES		RCH FEES	EXAMIN	ATION FEES		
Application Type	Fac. (\$)	Small Entity	Faa (6)	Small Entity	Fac (\$)	Small Entity	Face	Doid (#)
Utility Utility	<u>Fee (\$)</u> 310	<u>Fee (\$)</u> 155	<b>Fee (\$)</b> 510	Fee (\$) 255	<u>Fee (\$)</u> 210	<u>Fee (\$)</u> 105	rees	<u>Paid (\$)</u>
Design	210	105	100	50	130	65		_
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	0	0	0	0		
2. EXCESS CLAIM FEES			•	·		-		Small Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)							50	25
Each independent claim	-	ng Reissues)					210	105
Multiple dependent claims							370	185
Total Claims						Multiple Dependent Claims		
HP = highest number of total of	(0) x _	= reater than 20.		<del></del>	<u>ree</u>	<u>∍ (\$)</u>	Fee Paid (S	<u>51</u>
_	-	Fee (\$)	Fee P	aid (\$)				_
	(0) ×	=						
HP = highest number of indep	endent claims paid	for, if greater than 3	3.					
3. APPLICATION SIZE F								
If the specification and of	drawings excee	ed 100 sheets of	paper (	excluding electro	onically file	ed sequence or	computer	0
listings under 37 CFI sheets or fraction the	reof. See 35 L	application size J.S.C. 41(a)(1)(C	iee due i) and i	37 CFR 1.16(s).	or small en	iuty) for each a	ddilionai 3	U
Total Sheets	Extra Sheets			ditional 50 or frac	tion thereof	Fee (\$)	Fee	Paid (\$)
100 = _		/50 =		(round up to a who	le number)	·	=	
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specifica			-					
Other (e.g., late filing	surcharge): 12	251 Extensi	on for	response within	n first mor	nth	12	20.00
SUBMITTED BY	, [] []//							
Signature	Like	where		Registration No. (Attorney/Agent)	47,522	Telephone	(212) 52	7-7700
Name (Print/Type) Louis J.	DelJudice					Date	May 6.	2008